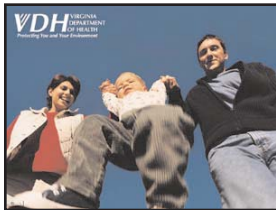




onscreen as people enter and find their seats

advance >>



On behalf of the Virginia Board of Health, I want to thank you for the opportunity to speak about an epidemic that's having dire affects on our society. One that has every indication of increasing, and one that we need your help to control.

advance >>



I'm not talking about terrorism, as horrific as the attacks of 9-11 were.

And I'm not talking about the flu and last year's vaccine shortage.

Nor am I talking about the tsunami that devastated South Asia last year.

Of course, all these threats do come with their own stark reminders of how vulnerable we are.

advance >>

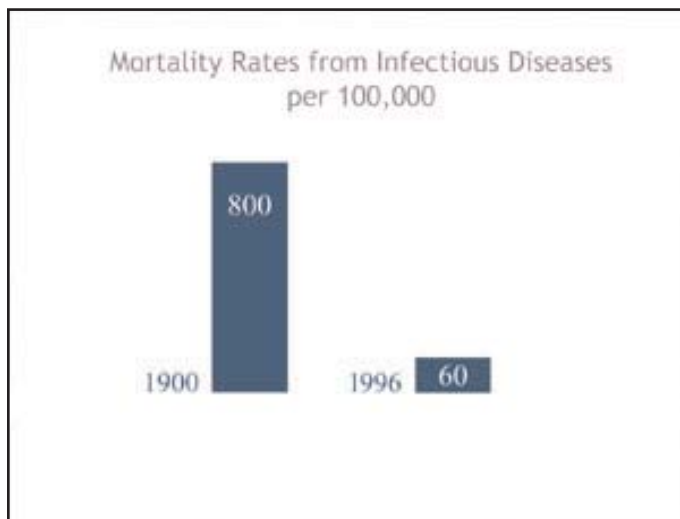


But we're faced with another threat that, each year, takes more lives in America than terrorism, the flu and the tsunami combined.

I'm talking about the epidemic of chronic diseases – such as heart disease, cancer, and diabetes – that have become so pervasive that we just don't seem to take notice of the threat they represent.

Each year, 1.7 million Americans die from a chronic disease. 1.7 million. That's just about equal to the combined population of Richmond, Roanoke, Fairfax County and Virginia Beach.

advance >>



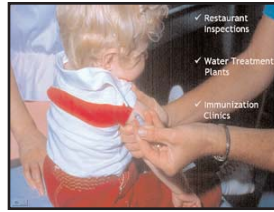
Chronic diseases have long since surpassed communicable diseases as the leading causes of death and disability in the United States and in Virginia.

We no longer fear diseases such as smallpox, polio, measles and diphtheria like we did in the early 1900s.

We have been very successful in controlling and containing these diseases.

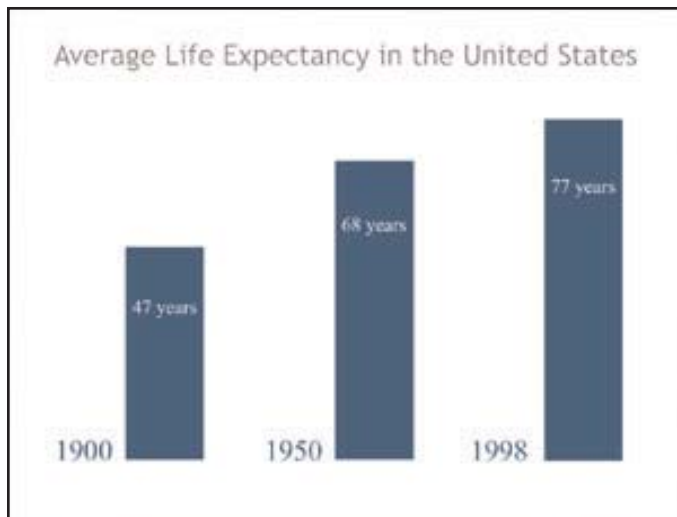
For example measles, which in 1935, affected more than 1,200 out of every 100,000 Virginians, today typically infects only two or three children a year in the state.

advance >>



Society's public health efforts stopped these and other epidemics through interventions such as separating sewage from drinking water, inspecting food supplies and conducting mass immunization clinics

advance >>



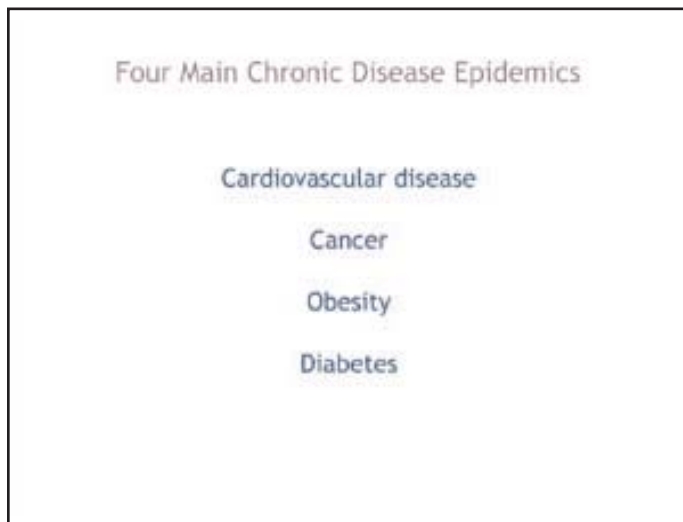
These and other public health advances have given us the increased life expectancy that we enjoy today.

advance >>



But our longer life span, and our modern lifestyle, have burdened us with chronic health threats that are long lasting and highly resistant to our efforts to eradicate them. They are prevalent and rapidly affecting many individuals at the same time – the very definition of an epidemic.

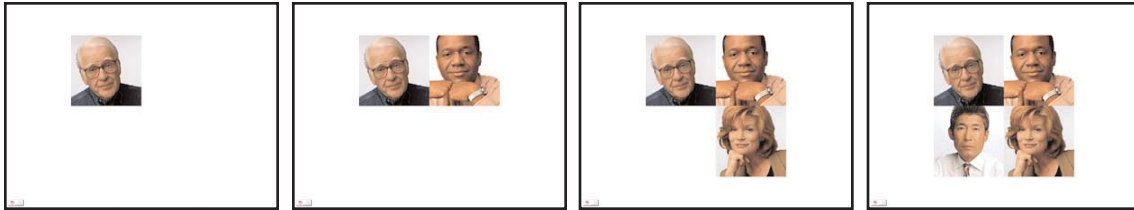
advance >>



Today we're mainly faced with four chronic disease epidemics:

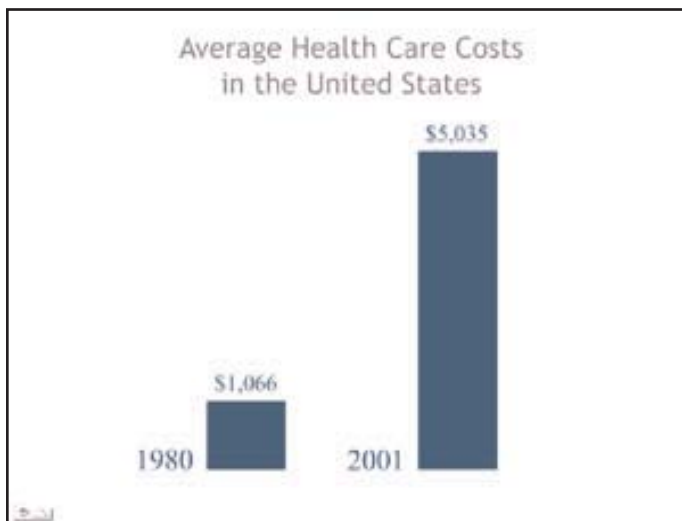
Cardiovascular disease
Cancer
Obesity
Diabetes

advance >>



And whom does chronic disease affect? Really, just about everyone. African Americans. Women. Elderly. Smokers. The sedentary. Non-high school graduates. Children. Adult men. Do you recognize yourself - or family, or friends - among any of these groups?

advance >>



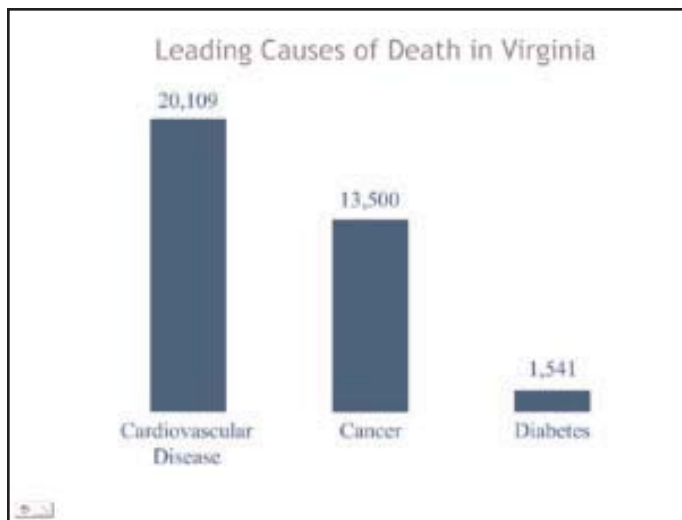
Chronic disease sufferers are the largest, most expensive, and fastest growing segment of the nation's healthcare system.

In 1980, America's healthcare costs were \$245 billion – more than any other nation in the world. Costs then averaged \$1,066 per person.

In 2001, our cost for health care had risen to \$1.4 TRILLION, or \$5,035 for each man, woman and child.

Chronic disease is attributable for about 75 percent of those costs.

advance >>



Let's take a look at what chronic diseases are doing to us here in Virginia.

More Virginians die from cardiovascular disease than from anything else. In 2001, it claimed 20,109 of our neighbors.

Cancer has been the second leading cause of death in Virginia since 1950. It took 13,500 lives in 2001.

These two diseases annually claim more lives than the population of Petersburg. But other health threats often seem to generate more public concern.

Perhaps because of their emotional and sometimes sensational nature, we hear a lot about communicable diseases such as AIDS and the flu. And auto accidents are reported on TV nearly every day. But the toll they take doesn't approach that of chronic diseases. For example, in 2001, AIDS claimed 272 Virginians. The flu and pneumonia took just under 1,500. Auto accidents just over 900. But together that is less than 10 percent of the Virginians who died from cardiovascular disease and cancer.

advance >>

Someone in the U.S. dies from a chronic disease every 33 seconds

05

Let's take a brief look at these diseases individually to see the toll they take – in both human and economic terms.

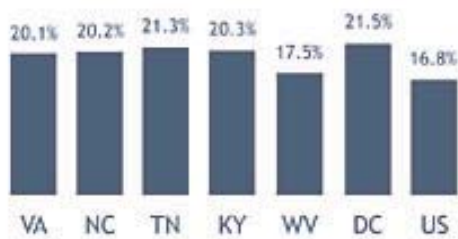
About 950,000 Americans die each year from cardiovascular diseases. Its estimated cost in 2003 was \$352 billion.

Cardiovascular diseases claim more lives each year than the next four leading causes of death combined.

advance >>

Rate of Premature Death Due to Heart Disease

*Percent of Heart Disease Deaths
Considered Premature*



Source: U.S. Centers for Disease Control and Prevention, 2003.

advance >>

Relative Risk of Developing
Coronary Heart Disease, Stroke
or Diabetes by Age 65

Men, Age 50

Non Smoker, Normal Weight, Active: 11%

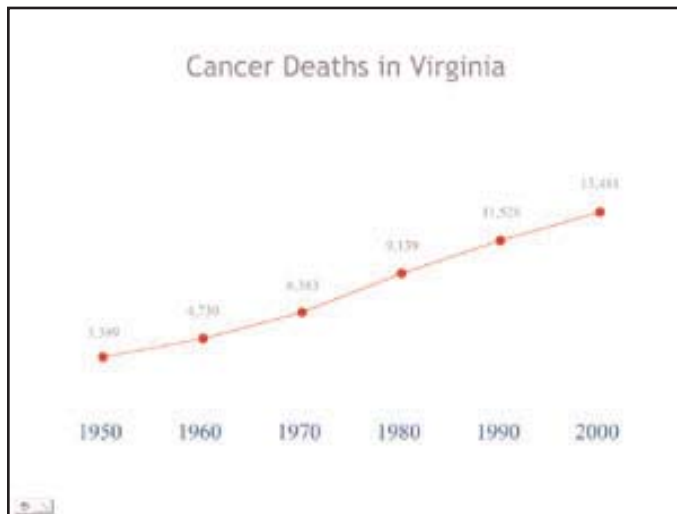
Smoker, Heavy, Inactive: 58%

Ratio: 5.5

Source: Jones, et. Al., Arch. Internal Medicine, 1996, Vol. 243

advance >>

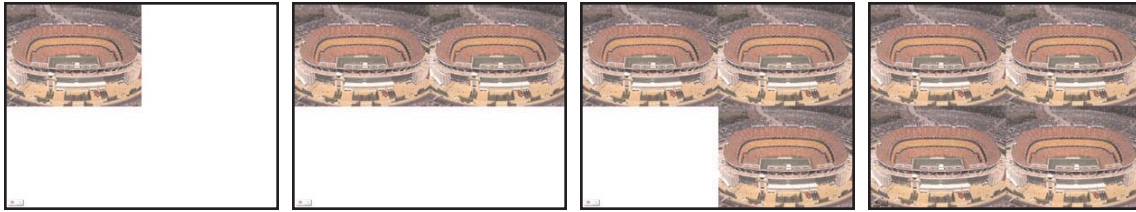
Cancer Deaths in Virginia



While the overall cancer rate in the U.S. has declined over the past decade, it has remained constant in Virginia.

Approximately 65,000 Virginians died from cancer between 1997 and 2001.

advance >>



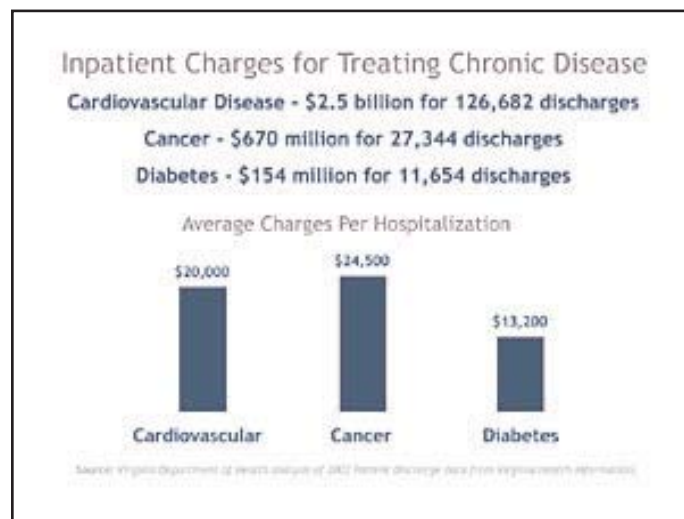
The number of Virginians who have diabetes -- almost 342,000 -- would fill Fed Ex Field, home of the Washington Redskins, four times over.

Six percent of Virginians have diabetes. Nationally, the number of cases is expected to double by the year 2050.

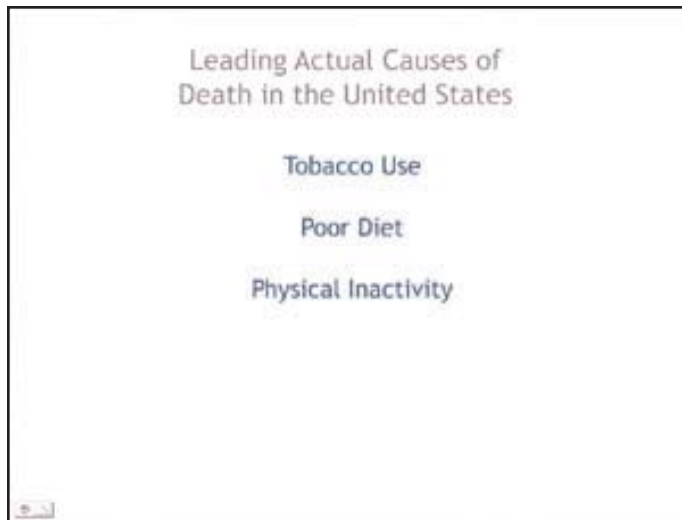
And it's becoming one of the most common chronic diseases among children – with one of every 400-500 children developing type 2 diabetes.

The economic toll of diabetes is high too. The direct and indirect costs of diabetes in the U.S. is nearly \$132 billion.

advance >>



advance >>



So what's causing this epidemic of chronic disease? Age, gender and race certainly play their roles, but mainly it's our lifestyle.

The leading actual causes of death in the U.S. are tobacco use, poor diet, and physical inactivity. These are also the major risk factors that chronic diseases have in common.

Other significant factors that contribute to the chronic disease epidemic include our failure to get regular health screenings and our failure to properly manage care of conditions once they are diagnosed.

advance >>



Let's look at the affects obesity and being overweight have on our health.

In Virginia, 58 percent of adults were either overweight or obese in 2002.

Obesity is the leading risk factor of several chronic diseases, including cardiovascular disease, diabetes, hypertension and arthritis.

Where did the extra weight come from: Eating too much of the wrong stuff and exercising too little to burn off the excess calories. It has been estimated that sixty percent of young people eat too much fat. Seventy-four percent of Virginians eat fewer than the recommended five servings of fruits and veggies daily. And 73 percent say they don't exercise the recommended 30 minutes a day most days a week. Many don't get any physical activity at all.

advance >>

How Obesity Impacts Employers

Employers lose more than \$13 billion per year due to consequences of obesity

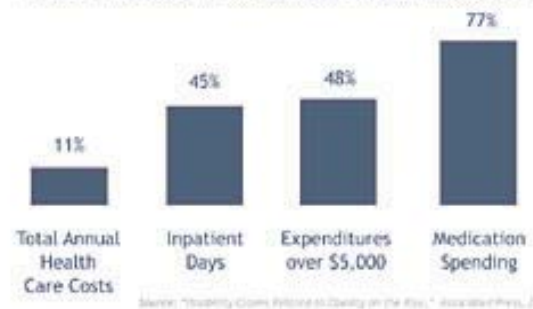
Increased healthcare use (\$8 billion for health insurance)

Lower productivity and increased absenteeism (\$2.4 billion paid sick leave, 39 million lost work days, 239 restricted activity days)

Increased health and disability premiums (\$2.8 billion)

How Obesity Impacts Employers

Differences in Health Care Expenditures
Percent Increase in Spending for Obese Employees



advance >>



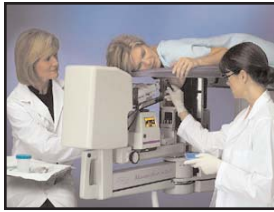
The only exercise many people get is going outside to smoke.

Tobacco is the leading cause of preventable death in the U.S. It's the number one cause of death in Virginia, claiming 9,100 each year.

Tobacco kills more people, about 400,000 a year, than AIDS, alcohol, auto accidents, fires, illegal drugs, murders, and suicides COMBINED.

If current smoking patterns continue, an estimated 6.4 million children alive today will die prematurely of tobacco-related diseases.

advance >>



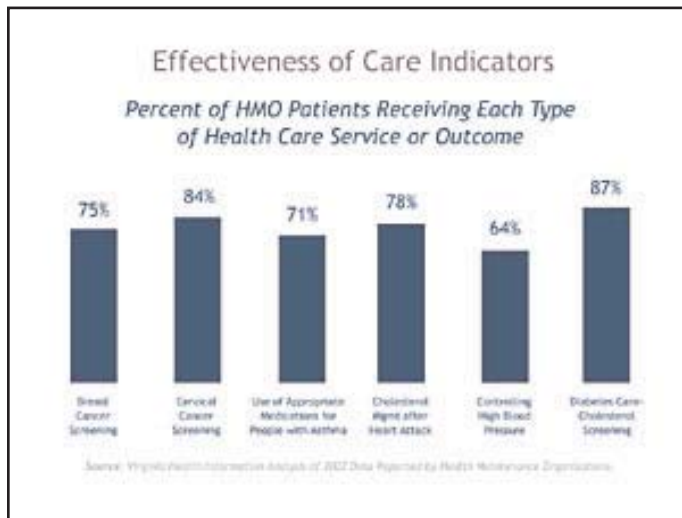
We have made great strides in developing technology that enables us to identify health threats – such as many forms of cancer – in their early stages when they can often be successfully treated.

Mammograms, for example, can detect breast cancer up to two years before any symptoms can be felt.

And high blood pressure is easily detected.

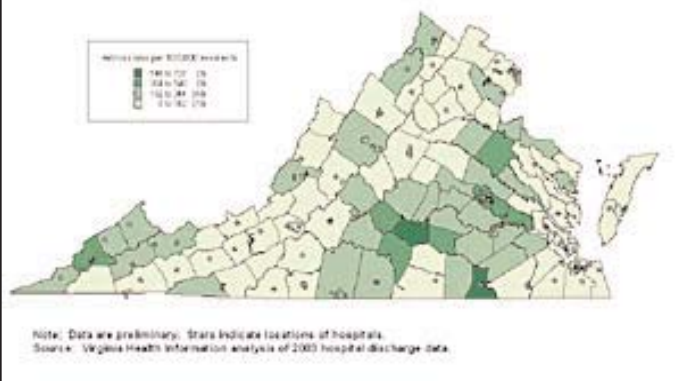
Yet many people don't take advantage of these tests and for many others access to these and other screening and diagnostic services remains a major challenge.

advance >>



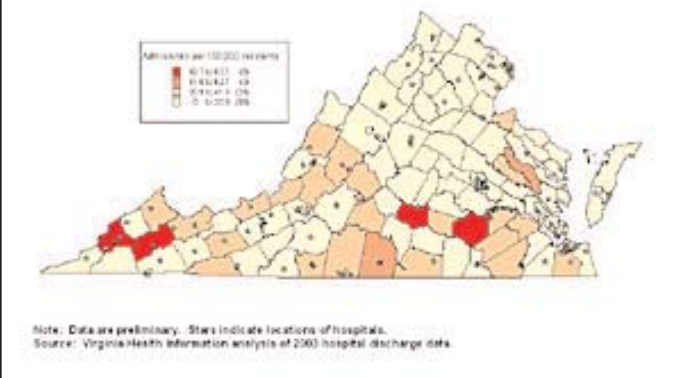
advance >>

Hospitalization Rates for Pediatric Asthma



advance >>

Hospitalization Rates for Uncontrolled Diabetes



advance >>

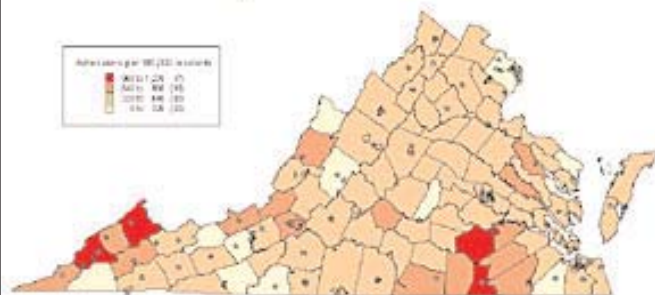
Hospitalization Rates for Hypertension



Note: Data are preliminary. Stars indicate locations of hospitals.
Source: Virginia Health Information analysis of 2003 hospital discharge data.


advance >>

Hospitalization Rates for Congestive Heart Failure



Note: Data are preliminary. Stars indicate locations of hospitals.
Source: Virginia Health Information analysis of 2003 hospital discharge data.

advance >>



"If I had known how long I would
live I would have taken better
care of myself."

This tongue-in-cheek observation has been attributed to a number of prominent people.

But it highlights another factor affecting the burden of chronic disease - the percentage of people in the United States who are over age 65.

Today that number is 33 million and it's expected to double in the next 30 years.

Medical costs will increase as we get older. Health care costs for a 65-year-old today are four times that for a 40-year-old.

If current policies and conditions continue, by the year 2011, our nation will be spending over \$2.8 trillion on health care.

It's in society's interest to keep people healthier longer, one reason being that we can't afford this escalating cost.

advance >>



So far I've painted a pretty sad picture of the state of our health.

But there is hope for the future. And it lies in prevention.

It's true that chronic disease is the most common and costly of all health problems we face. But it's also one of the most preventable.

I'd like to show you some examples of what the power of prevention can achieve.

advance >>



By modifying just three behaviors – tobacco use, lack of physical activity and poor eating habits – we can reduce 33 percent of the deaths that occur in the U.S. each year.

Positive changes in diet, weight control, physical activity and smoking could prevent 60-70 percent of cancers in the U.S.

Regular screening for colorectal cancer can reduce the number of people who die from this disease by 30 percent.

Control of blood pressure can reduce heart disease and stroke by up to 50 percent, and after one year of quitting smoking, the risk of heart disease is reduced by 50 percent.

advance >>



Despite this admonition from Hippocrates and despite evidence that prevention works, our health care system remains primarily focused on treating short term acute illness. While some progress is being made, our health care system is not yet well designed to meet the needs of people with chronic disease.

But by making prevention a priority we can become a healthier nation and state.

Many Americans could enjoy an additional 5 to 7 years of healthy life and avoid the costs of chronic disease and disability if we as a society do three things:

- 1) Improve access to quality screening and health care services
- 2) Emphasize healthy behavior, and
- 3) Adopt broad policies and strategies that encourage and support healthy choices, and that support reduction of preventive risk factors for chronic disease.

advance >>



We are at a defining moment. We are, for example, beginning to see more bike lanes and walking trails that offer people a safe environment for physical activity. And we are now seeing people walking, jogging and biking on our neighborhood streets.

But one of our biggest problems in preventing chronic diseases is closing the gap between what we know is effective and what we actually encourage, promote and require as a society.

We must continue and strengthen our efforts to balance the prevention and treatment sides of the health care equation.

advance >>

Agenda For Public Health

Given the severe consequences that chronic disease poses for Virginia's economy and to the quality of life on its residents, the Commonwealth cannot afford to ignore the urgency of seeking new avenues to address these ominous trends

The State Board of Health supports a multi-pronged and well-coordinated effort employing the resources of subject matter experts, the public sector (state and local government) and the private sector in the institution and promotion of best practices in the prevention and the management of chronic disease

The State Board of Health supports programs and policies that promote healthy behaviors, avoidance of known risk factors such as tobacco use, poor nutrition, and physical inactivity, and the evidence-based management of chronic diseases.

So what does the State Board of Health want to do about all this?

The Board firmly believes that given the severe consequences that chronic disease poses for Virginia's economy and to the quality of life of its residents, the Commonwealth cannot afford to ignore the urgency of seeking new avenues to address these issues.

The State Board of Health supports a multi-pronged and well-coordinated effort employing the resources of subject matter experts, the public sector and the private sector in the institution and promotion of best practices in the prevention and the management of chronic disease.

The State Board of Health supports programs and policies that promote healthy behaviors, avoidance of known risk factors such as tobacco use, poor nutrition, and physical inactivity, and the evidence-based management of chronic diseases.

Let me provide you with some examples of the kinds of programs and policies that we are talking about.

advance >>



We need to promote health and wellness programs.

Chronic disease is not an inevitable consequence of aging. Often its origin is rooted in the health damaging behaviors people learned as children and continued to practice throughout their lives.

Studies show that with education and social support, people will embrace programs that promote healthy eating, daily physical activity, and avoidance of tobacco, alcohol and illicit drugs.

But without support from our public and private sector leaders and institutions to improve our community and environment, individual choice and effort will take us only so far.

advance >>



We also need policy and environmental changes that affect large segments of the population simultaneously.

Adopting healthy behaviors is easier if we establish supportive community norms and proven health promotion measures such as:

Safe walking and cycling trails.

Healthy menu selections in restaurants, schools and worksites.

Daily physical activity, and

Smoke-free policies in workplaces and public areas.

advance >>



Screening and diagnostic technologies are effective but we need to improve access to these tools to effectively fight chronic disease

We need better training and education of health care professionals to close the gap between the time when effective prevention tools are discovered and when they are applied.

We need public and private health insurance programs that pay for chronic disease prevention, screening and treatment services.

And we need to educate patients to manage their chronic conditions effectively. Physicians play an important role here – they are uniquely positioned to influence their patients to adopt healthy behaviors that can prevent chronic diseases.

advance >>



Health disparities affect the length of life; rates of disease, disability, and death; the severity of disease and access to treatment for members of racial and ethnic groups. Many of the health disparities that have been documented describe how African Americans, in particular, are affected by various diseases at much higher rates than the rest of society. These conditions include, for example, heart disease, breast cancer and obesity.

Nearly half of African American women are classified as obese.

We need more prevention research to identify the causes of health disparities and the best ways to provide access to high-quality care. And we need new and innovative partnerships between government agencies and the private sector.

advance >>



We must market “health” just as businesses market their products and services.

Evidence shows that people listen to and act on clear, compelling health information.

We must use communication strategies to inform and influence individual and community decisions on health.

And apply scientific approaches to social marketing, health education and consumer research to make good health habits easy and enjoyable to develop and maintain.

advance >>

Agenda For Public Health

Next Steps:

The Board will seek to establish public/private partnerships to further the accomplishment of its objectives.

The Board will focus on encouraging the development of financial and non-financial incentives and disincentives for chronic disease prevention and control.

Subsequently, the board will work with other stakeholders to deliver education and outreach activities, including site visits, to make the public health and economic case for chronic disease prevention and control efforts.

To summarize and wrap up, the State Board of Health has made the prevention and control of chronic disease its top priority.

As some next steps...

The Board will seek to establish public/private partnerships to further the accomplishment of its objectives.

The Board will also focus on encouraging the development of financial and non-financial incentives and disincentives for chronic disease prevention and control.

Subsequently, the Board will work with other stakeholders through education and outreach activities, to make the public health and economic case for chronic disease prevention and control efforts.

Over the longer term, the Board intends to develop and advocate for public policy proposals that would support improved chronic disease prevention and control in Virginia.

We need your help and are requesting your support in our effort to significantly improve Virginia's capability to prevent and control chronic disease. We also seek and welcome your ideas and suggestions on how best to address this important issue.

advance >>

Questions & Comments

prepared by



in cooperation with the State Board of Health



end of presentation